generally required from a level previous to the phase of trial underway in other countries.

For new drug substances discovered in other countries, Phase I trials are not usually allowed to be initiated in India, unless Phase I data relating to human/clinical pharmacology is available, exemption in this regard is available in cases where the drug has a special relevance in this country in terms of public health.

New drug substances discovered in this country need to undertake clinical trials right from Phase I.

(c) To streamline the process of conducting clinical trials of drugs and their clearance Government have *inter alia* taken the following measures:—

(1) A committee of experts has been set up *vide* order dated 17.01.2001 which also spells out the modalities for processing applications relating to investigational new drugs.

(2) Guidelines relating to Good Clinical Practices (GCP) are also being finalised for early publication.

World Bank assisted Health Schemes for Maharashtra

264. SHRI SURYABHAN PATIL VAHADANE: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether some World Bank aided health care projects have been launched in Maharashtra;

(b) if so, the details thereof;

(c) the funds allocations made for these projects during the last three years, year-wise; and

(d) what is the allocation made for these projects for the Adivasi districts in the State?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) to

(d) *World Bank assisted Maharashtra Health Systems development project:*

Maharashtra Health Systems Development Project has been launched in 1999 with the main objective of assisting the Government of Maharashtra to (a) improve the performance of the health care system through systematic enhancement in the quality, effectiveness and coverage of health services at the first referral level and selective coverage at the community level and (b) improve efficiency in the allocation and use of health resources through policy and institutional development. The total cost of the project is Rs. 747.5 crores. Under this project the expenditure is incurred initially by the State Government and then it is reimbursed by the World Bank through GOI. Budget allocation for the year 1999-2000 is Rs. 67 crores. Total allocation made for the Adivasi district is Rs. 9.47 crores.

Reproductive Child Health (RCH) programme:

Government of India launched the RCH Programme during 1997-98 by integrating all the MCH interventions with CSSM Programme and adding the additional component of RTI/STI for implementation during the 9th Plan period. The Programme is jointly funded by the World Bank, European Commission, UNICEF etc. The World Bank assistance is received Centrally and not State specific on the basis of reimbursement against actual expenditure. The programme is being implemented in all the districts of the country including adivasi districts of the country including adivasi districts of Maharashtra.

The States are being assisted for the strengthening of the Primary Health Care system by providing additional ANMS, PHNs/Staff Nurse, Lab. Technician. Safe Motherhood Consultant and Anaesthetists on contractual basis besides supply of vaccines, drugs and equipments and strengthening of IEC, MIS, NGOs participation and training activities etc. for implementation of the Programme.

A special project has also been taken up in the Nasik district with the funding for upgradation of infrastructures and service delivery

therein. Nasik is a tribal district having 32.07% tribal and SC population. The allocation under the RCH project for five years is Rs. 13.78 crores.

This Ministry has negotiated a project namely Immunisation Strengthening Project with World Bank amounting to US$ 142.6 million with the objective of eliminating polio incidence and strengthening of routine immunization activities. It would be implemented in all districts of the country. The assistance provided to Maharashtra under RCH Programme (details of assistance to Nasik sub-project indicated separately) during last three years are as under:

(Rs. in crores)

Year	Assistance provided (Cash & Kind)	
	Nasik Sub-Project	Total RCH
1997-98	2.25	26.58
1998-99	—	37.50
1999-2000	1.75	45.28

National Leprosy Eradication Programme:

World Bank aided National Leprosy Project was implemented in all States/UTs including Maharashtra for a period of 6 years from 1993-94.

Funds allocated to Maharashtra during last 3 years is as under:

Year	Cash	Kind	District	Total
1997-98	39.99	74.43	351.16	465.58
1998-99	34.50	126.56	364.00	525.06
1999-2000	45.00	88.60	267.44	401.04

All the districts of Maharashtra are covered by MDT. The funds provided to Adivasi Leprosy Society during last 3 years is given below:

	1997-98	1998-99	1999-2000
Nasik	12.96	10.00	12.00
Dhule	19.00	20.00	32.51
Gadchiroli	4.17	8.00	6.05
Yeotmal	7.51	13.00	7.70

Revised National TB Control Programme (RNTCP)

Revised National TB Control Programme (RNTCP) has been launched in Maharashtra with assistance from World Bank. The list of districts of Maharashtra which are implementing RNTCP and are under preparatory phase are given in Statement I (*See* below).

Funds allocated under the project to the project districts and State TB cell, Maharashtra are as under:

(Rs. in lacs)

Year	Allocation
1998-1999	660.89
1999-2000	852.54
2000-2001	1275.43

There is no special allocation for tribal areas. However, under the Project, norms are relaxed for RNTCP implementation in tribal districts as under:

- Opening of microscopic centre in 50,000 population against norm of one lakh.
- Opening of new DOT centres.
- Provision of reimbursement of transport expenses for patients and attendant while coming to DOT Centre for taking treatment.

Cataract Blindness Control Project:

World Bank assisted Cataract Blindness Control Project is being implemented in Maharashtra since 1994-95.

Cash grants released to the Government of Maharashtra during last three years is as follows:—

(Rs. in lakhs)

Year	1997-98	1998-99	1999-2000
Amount	99.27	87.00	352.75

A statement showing released of grants-in-aid to District Blindness Control Society of Maharashtra is enclosed at Statement II (*See* below).

Enhanced Malaria Control Project:

The Enhanced Malaria Control Project was made effective from 30-9-1997 covering the tribal areas of the peninsular States namely Andhra Pradesh, Bihar, Gujarat, Madhya Pradesh, Maharashtra, Orissa and Rajasthan. Maharashtra has 14 districts under Enhanced Malaria Control Project.

Funds allocation for the last three years is given in the Statement III and IV (*See* below)

Criteria for selection of areas in the Enhanced Malaria Control Project was based PHC-wise as follows:

1. Annual Parasitic Incidence (API) of more than 2 for the last three years.

2. P. falciparum is more than 30% of malaria cases.

3. 25 per cent population of the PHC is tribal and

4. The area has been reporting deaths due to malaria.

National AIDS Control Project:

National AIDS Control Project, which is a World Bank assisted Project is being implemented all over the country and Maharashtra is part of this project. During the last three years following allocation has been made for the Maharashtra:—

(Rs. in lakhs)

	1998-99	1999-2000	2000-01
1. Maharashtra State AIDS Control Society	800.00	998.35	702.00
2. Mumbai District AIDS Control Society	350.00	670.00	406.65
TOTAL:	1150.00	1668.35	1108.65

No separate allocation is made for Adivasi districts of Maharashtra.

Statement I

Status of preparatory activities of Maharashtra

Districts already implementing RNTCP
Mumbai
Pimpri Chinchwad
Pune
Pune Rural
Raigad
Aurangabad
Aurangabad Corp.
Kalyan Dombivli MC
Kolhapur
Kolhapur Mun. Corp.
Nasik
Nasik Corporation

Navi Mumbai

Sangli Rural

Sangli Corp.

Satara

Thane

Thane Municipal Corp.

Districts already appraised and will be starting service delivery by end of February, 2001

Ahmednagar

Aurangabad Corp.

Kolhapur Mun. Corp.

Sangli Corp.

Districts undergoing preparatory activities

Kalyan Dombivli MC

Thane

Ulhasnagar Mun. Corp.

Beed

Dhule

Jalgaon

Jalna

Latur

Osmanabad

Ratnagiri

Solapur

Solapur Municipal Corp.

Sindhudurg

Statement II

Status of Funds Released to DBCS

State: Maharashtra

State Census Code:14

(Rs. in lakhs)

District Code	District Name	1997-98	1998-99	1999-2000	1997-2000
1	Greater Bombay (Bombay)	0.00	0.00	0.00	0.00
2	Thane	14.00	21.00	13.23	48.23
3	Raigad (Alibag)	9.00	6.00	7.14	22.14
4	Ratnagiri	6.00	10.50	11.66	28.16
5	Sindhudurg (Kudal)	9.00	10.25	6.07	25.32
6	Nashik	9.00	11.00	8.56	28.56
7	Dhule	17.00	16.00	19.59	52.59
8	Jalgaon	14.00	11.00	27.61	52.61
9	Ahmednagar	14.00	11.00	7.14	32.14
10	Pune	23.00	16.00	41.80	80.80
11	Satara	8.00	11.00	1.66	20.66
12	Sangli	22.00	11.00	22.49	55.49
13	Solapur	6.00	16.00	17.30	39.30
14	Kolhapur	9.00	16.00	23.26	48.26
15	Aorangabad	9.00	6.00	10.49	25.49
16	Jalna	6.00	11.00	6.66	23.66
17	Parbhani	9.00	11.00	1.66	21.66
18	Beed	9.00	16.00	10.14	35.14
19	Nanded	6.00	11.00	5.97	22.97
20	Osmanabad	6.00	11.00	1.66	18.66
21	Latur	9.00	26.00	1.66	36.66
22	Buldana	20.00	11.00	9.92	40.92
23	Akola	14.00	11.00	7.14	32.14
24	Amaravati	6.00	11.00	8.21	25.21
25	Yavatmal	11.00	11.00	7.99	29.99
26	Wardha	9.00	11.00	9.66	29.66
27	Nagpur	20.00	11.00	10.56	41.56
28	Bhandara	3.00	11.00	7.87	21.87

(Rs. in lakhs)

District Code	District Name	1997-98	1998-99	1999-2000	1997-2000
29	Chandrapur	10.00	16.00	0.00	26.00
30	Gadchiroli	6.00	10.50	5.00	21.50
31	Bombay Suburban (Bandra)	0.00	0.00	0.00	0.00
	TOTAL:	**313.00**	**362.25**	**312.13**	**987.38**

Statement-III

Statement of Cash Grant released

Account for 12/2000 Posted in 01/2001

NAME OF STATE: MAHARASHTRA

Sl. No.	Name of Districts (96 DMCS)	Cash Grant Released (In 1998-99) (Rs. in Lakh)	Grant Released (In 1999-2000) (Rs. in Lakh)	Grant Released (In 2000-2001) (Rs. in Lakh)	Total Grant (In Rs.)
1	Ahmednagar	19.45	10		2945000
2	Amravati	16.25	10		2625000
3	Bhandara	16.4	10		2640000
4	Chandrapur	17.33	15		3233000
5	Dhule	25.07	10		3507000
6	Gadchiroli	23.73	10		3373000
7	Jalgaon	10.00			1000000
8	Nagpur	10.00		10	2000000
9	Nanded	19.89	10		2989000
10	Nasik	10.00		15	2500000
11	Pune	10.00			1000000
12	Raigad Pen	10.00			1000000
13	Thane	22.09	10		3209000
14	Yavatmal	23.51	10		3351000
	TOTAL:	**233.72**	**95**	**25**	**35372000**

Statement-IV

Commodity/Cash Grant

MAHARASHTRA

Sl. No.	Description/Items	Quantity/Nos.	Amount/Cost in Rs.
YEAR 1997-98			
1	Vehicles	2 Nos.	750000
	TOTAL		750000
YEAR 1998-99			
1	Lambdacyhalothrin	9,375 Kg.	22537500
2	Cyfluthrin	16,875 Kg.	40567500
3	Deltamethrin	60,000 Kg.	45075000
4	Biolarvacides	0.75 M.T.	637500
5	Chloroquine Tabs.	300 lakhs	9525300
6	Cash Grants to 14 DMCS		23372000
	TOTAL		141714800
YEAR 1999-2000			
1	Synthetic Pyrethroid:		
	Gadchiroli	8.625 M.T.	20514784
	Dhule	8.625 M.T.	20514784
	Nanded	6.46875 M.T.	15383413
	Amravati	6.46875 M.T.	15378186
	Bhandara	2.7125 M.T.	6446245
	Chandrapur	9.8828125 M.T.	23486466
	Yavatmal	6.46875 M.T.	15386089
	Ahmednagar	10.78125 M.T.	25637770
	Bhandare	5.9125 M.T.	14096476
	Thane	8.625 M.T.	20507816
2	DEC Tabs.	25 lakhs	80.525

Sl. No.	Description/Items	Quantity/Nos.	Amount/Cost in Rs.
3	Vehicles	18 Nos.	6075953
4	Medicated Bednets	10,000 Nos.	2132000
5	Cash Grants*		9500000
	Total		**195140507**

***Note.**

1. 14 Districts having total number of 245 PHCs are covered under E.M.C.P.

Brain fever in Maharashtra

265. SHRI SURYABHAN PATIL VAHADANE: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether epidemic of brain fever has been breaking out for last five years in Maharashtra; and

(b) if so, the action taken to supply free vaccines in the State to Children and others, prone to the disease?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) and (b) There is no report of outbreak of epidemic of Brain Fever (Japanese Encephalitis) in the State of Maharashtra during the last 5 years. However, sporadic incidence of J.E has been reported from the State.

Financial assistance to heart patients

266. SHRI RAJU PARMAR:
SHRI BHAGATRAM MANHAR:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether any financial assistance is provided from the Health Minister's Discretional Grants to patients suffering from heart defects;

(b) if so, how many requests for financial assistance were received